

Union Calendar No. 131

117TH CONGRESS
1ST SESSION

H. R. 2364

[Report No. 117-181]

To amend title III of the Public Health Service Act to direct the Secretary, acting through the Director of the Centers for Disease Control and Prevention, to provide for a public education campaign to raise public awareness of synthetic opioids.

IN THE HOUSE OF REPRESENTATIVES

APRIL 5, 2021

Mr. KIM of New Jersey (for himself and Mr. PAPPAS) introduced the following bill; which was referred to the Committee on Energy and Commerce

NOVEMBER 30, 2021

Additional sponsor: Mr. RUIZ

NOVEMBER 30, 2021

Reported with an amendment; committed to the Committee of the Whole House on the State of the Union and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on April 5, 2021]

A BILL

To amend title III of the Public Health Service Act to direct the Secretary, acting through the Director of the Centers for Disease Control and Prevention, to provide for a public education campaign to raise public awareness of synthetic opioids.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 *This Act may be cited as the “Synthetic Opioid Dan-*
5 *ger Awareness Act”.*

6 **SEC. 2. SYNTHETIC OPIOIDS PUBLIC AWARENESS CAM-**

7 **PAIGN.**

8 *Part B of title III of the Public Health Service Act*
9 *is amended by inserting after section 317U (42 U.S.C.*
10 *247b–23) the following new section:*

11 **“SEC. 317V. SYNTHETIC OPIOIDS PUBLIC AWARENESS CAM-**

12 **PAIGN.**

13 “(a) IN GENERAL.—Not later than one year after the
14 date of the enactment of this section, the Secretary shall
15 provide for the planning and implementation of a public
16 education campaign to raise public awareness of synthetic
17 opioids (including fentanyl and its analogues). Such cam-
18 paign shall include the dissemination of information that—

19 “(1) promotes awareness about the potency and
20 dangers of fentanyl and its analogues and other syn-
21 thetic opioids;

22 “(2) explains services provided by the Substance
23 Abuse and Mental Health Services Administration
24 and the Centers for Disease Control and Prevention
25 (and any entity providing such services under a con-

1 tract entered into with such agencies) with respect to
2 the misuse of opioids, particularly as such services re-
3 late to the provision of alternative, non-opioid pain
4 management treatments; and

5 “(3) relates generally to opioid use and pain
6 management.

7 “(b) USE OF MEDIA.—The campaign under subsection
8 (a) may be implemented through the use of television, radio,
9 internet, in-person public communications, and other com-
10 mercial marketing venues and may be targeted to specific
11 age groups.

12 “(c) CONSIDERATION OF REPORT FINDINGS.—In plan-
13 ning and implementing the public education campaign
14 under subsection (a), the Secretary shall take into consider-
15 ation the findings of the report required under section 7001
16 of the SUPPORT for Patients and Communities Act (Pub-
17 lic Law 115–271).

18 “(d) CONSULTATION.—In coordinating the campaign
19 under subsection (a), the Secretary shall consult with the
20 Assistant Secretary for Mental Health and Substance Use
21 to provide ongoing advice on the effectiveness of information
22 disseminated through the campaign.

23 “(e) REQUIREMENT OF CAMPAIGN.—The campaign
24 implemented under subsection (a) shall not be duplicative

1 *of any other Federal efforts relating to eliminating the mis-*
2 *use of opioids.*

3 “(f) EVALUATION.—

4 “(1) IN GENERAL.—*The Secretary shall ensure*
5 *that the campaign implemented under subsection (a)*
6 *is subject to an independent evaluation, beginning 2*
7 *years after the date of the enactment of this section,*
8 *and every 2 years thereafter.*

9 “(2) MEASURES AND BENCHMARKS.—*For pur-*
10 *poses of an evaluation conducted pursuant to para-*
11 *graph (1), the Secretary shall—*

12 “(A) establish baseline measures and bench-
13 *marks to quantitatively evaluate the impact of*
14 *the campaign under this section; and*

15 “(B) conduct qualitative assessments re-
16 *garding the effectiveness of strategies employed*
17 *under this section.*

18 “(g) REPORT.—*The Secretary shall, beginning 2 years*
19 *after the date of the enactment of this section, and every*
20 *2 years thereafter, submit to Congress a report on the effec-*
21 *tiveness of the campaign implemented under subsection (a)*
22 *towards meeting the measures and benchmarks established*
23 *under subsection (e)(2).*

24 “(h) DISSEMINATION OF INFORMATION THROUGH
25 *PROVIDERS.—The Secretary shall develop and implement*

*1 a plan for the dissemination of information related to synthetic
2 opioids, to health care providers who participate in
3 Federal programs, including programs administered by the
4 Department of Health and Human Services, the Indian
5 Health Service, the Department of Veterans Affairs, the De-
6 partment of Defense, and the Health Resources and Services
7 Administration, the Medicare program under title XVIII
8 of the Social Security Act, and the Medicaid program under
9 title XIX of such Act.”.*

10 SEC. 3. TRAINING GUIDE AND OUTREACH ON SYNTHETIC
11 OPIOID EXPOSURE PREVENTION.

12 (a) TRAINING GUIDE.—Not later than 18 months after
13 the date of the enactment of this Act, the Secretary of Health
14 and Human Services shall design, publish, and make pub-
15 licly available on the internet website of the Institute, a
16 training guide and webinar for first responders and other
17 individuals who also may be at high risk of exposure to
18 synthetic opioids that details measures to prevent that expo-
19 sure.

(b) *OUTREACH.*—Not later than 18 months after the date of the enactment of this Act, the Secretary of Health and Human Services shall also conduct outreach about the availability of the training guide and webinar published under subsection (a) to—

25 (1) police and fire managements;

1 (2) *sheriff deputies in city and county jails;*
2 (3) *ambulance transport and hospital emergency*
3 *room personnel;*
4 (4) *clinicians; and*
5 (5) *other high-risk occupations, as identified by*
6 *the Assistant Secretary for Mental Health and Sub-*
7 *stance Use.*

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